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Application ID: 09681203

REVERSE AND FORWARD

MULTIPLE HOPPING USING A

PROXY WHERE AT LEAST ONE

HOP IS SECURE

First Named Inventor: Ariel Katz

Domestic/Foreign Application: Domestic Application

Filing Date: null

Effective Receipt Date: 2001–02–21

Submission Type: Utility Patent Filing

Filing Type: null

Confirmation Number: 0

Attorney Docket Number: 1018.126US1

cn=Michael Andrew Dryja, ou=Registered Attorneys, ou=Patent

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Total Fees Authorized: \$1358.0

Payment Category: CC - Credit Card

Credit Card Number: ********1000

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Card Holder Name: Michael Dryja

RAM User ID: EFSPROD

RAM Accounting Date: 2001–02–22

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TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0 Attorney Docket Number: 1018.126US1

REVERSE AND FORWARD MULTIPLE HOPPING USING A PROXY WHERE AT LEAST ONE HOP IS SECURE

First Named Inventor: Mr. Ariel Katz

SUBMITTED BY

Name: Mr. Michael Dryja

Registration Number: 39662

Electronic Signature Mark: Michael

Date Signed: 20010221

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Attached Files:

bibd-transmittal efsapds.xml
patent-assignment efsasgn.xml
fee-transmittal efsfee.xml
specification 126 spec.xml

declaration126 Decpoa 1 of 2.tifdeclaration126 Decpoa 1 of 2.tif

Attached Image File(s):

126 Decpoa 1 of 2.tif 126 Decpoa 2 of 2.tif Comments:

		PA'	TENT APPL	CATION		
DECLARATION AND POWER OF ATTORNEY			ATTORNEY DOCKET NO. 1018.126US1			
FOR PATENT APPLICAT	ION					
As a below named inventor	, I hereby dec	lare that:				
My residence/post office ad	Idress and citi	zenship are as stat	ted below next	to my name;	r an original, first and joint	inventor (if plural names
I believe I am the original, are listed below) of the sub	first and sole	inventor (if omy o	l for which a r	sieu below <i>)</i> o	on the invention entitled:	myonor (a prezes amous
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	to above. I a	cknowledge the d	uty to disclose	ali informati	on which is material to pate	madning as defined in 57
CFR 1.56.						
Foreign Application(s) and/or (Taim of Foreign	Priority				
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have also identified below any for	reign application	for patent or inventor	s) certificate hav	ng a filing date t	serore that of the apprication on wi	nen priority is claimed.
COUNTRY	APPLICA1	TION NUMBER	DATE	FILED	PRIORITY CLAIMED U	
					YES:	NO:
					YES:	NO:
Provisional Application I hereby claim the benefit under	rists 25 Timited C	totas Coda Saction 11	Q(a) of any I inite	1 States movision	nal application(s) listed below:	
I hereby claim the benefit under	itte 33, United S	tates code section 11	e of the any office	a diatos provision	an approximation to the second	
	AP	PLICATION SERIAL	NUMBER	FILI	NG DATE	
U.S. Priority Claim						
	disclosed in the p e material inform	rior United States app ation as defined in Ti	ite 37. Code of F	nner mrovinen ov	on(s) listed below and, insofar as to the first paragraph of Title 35, Unions, Section 1.56(a) which occurre	lited States Code Decider 112,
prior application and the national						(11
APPLICATION SERIAL NUMBER		FILING DATE			STATUS(patented/pending/	aoandoned)
POWER OF ATTORNEY: As a named inventor, I hereby Trademark Office connected the		owing attorney(s) and	or agent(s) lister	i below to prose	ceute this application and transact	t all business in the Patent and
Michael A	A. Dryja, Reg. N	o. 39662 Kat	ie E. Sako, Reg. I	No. 32628	Daniel D. Crouse, Reg. No.	. 32022
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Michael A. Dryja					Michael A. Dryja	
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PMB 694 Sammamish, WA 98074						
		- C les amiladas	and the	e all statements v	nade on information and belief are	believed to be true; and furthe
that there statements were made	with the knowle	doe that willful false s	statements and the	e like so made an	e punishable by fine or imprisonm the application or any patent issue	err of boar ander section for
Full Name of Inventor: Ariel 1	Katz				Citizenship: <u>Israeli</u>	
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72			C	110/01		
				Date		·
Inventor's Signature				DAIC		

Page 1 of 2

FOR PATENT APPEICATION (continued)	Al lumbi bucket no. midiados
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Post Office Address: Same	, ,
Variation of Street	2/19/0/ Date
Inventor's Signature	

FEE TRANSMITTAL

Electronic Version 1.0.4 Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 1358

BANK (CREDIT) CARD INFORMATION:

Credit Card Number:

1000

Expiration Date:

20030228

Authorized Name:

Michael Dryja

Billing Address:

98074

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid	
Utility Filing Fee	101	\$ 710	

Subtotal For Basic Filing Fee: \$ 710

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 36	103	\$ 18	16	\$ 288
Independent Claims: 7	102	\$ 80	4	\$ 320

Subtotal For Extra Claims Fees: \$ 608

ADDITIONAL FEES

Fee Description	Fee Code	Fee Paid
Recording Each Patent Assignment Per Property Fee	581	\$ 40

Subtotal For Additional Fees: \$ 40